



APPLICATION FOR RECORDS RETENTION SCHEDULE

OFFICE OF THE SECRETARY OF STATE
DEPARTMENT OF ARCHIVES AND HISTORY
RECORDS MANAGEMENT DIVISION

INSTRUCTIONS: See Publication No. 78-RM-1 for instructions on completing this form. Forward signed original to Department of Archives and History, Records Management Division, 330 Capitol Avenue, Atlanta, Georgia, 30334, Attention: Scheduling Section.

FOR AGENCY USE		FOR RECORDS MANAGEMENT USE	
Application Date	1. Agency Address Dept. of Offender Rehabil. 800 Peachtree St. NE Atlanta, GA 30308	Application Number 78-154	
Application Number		Date Received JUL 13 1978	Date Completed AUG 10 1978
2. Person to Contact Susan Davis - Records Management Office		Working Title	Telephone Number 894-5562
3. Action Requested a. <input checked="" type="checkbox"/> Establish Retention Schedule; record will continue to accumulate. b. <input type="checkbox"/> Dispose of present accumulation; no further accumulation anticipated. c. <input type="checkbox"/> Amend Application No. _____ Check One: <input type="checkbox"/> Change; <input type="checkbox"/> Supersede; <input type="checkbox"/> Void			
4. Dates of Series Earliest Latest 1974 1978		5. Records Series Title (followed by title used in office, if different) INDEPENDENT AND COOPERATIVE RESEARCH OR EVALUATION REPORTS	
6. Division and Office Function What is the function of the Division and the Office in which this record series is created? The Office of Research and Evaluation is responsible for systematically describing and assessing the programs and operations of the Department. The office was established as a staff component within the Commissioner's Office in 1977. All official research and statistics are released through the Office, and all evaluations of the correctional system are coordinated by the Office of Research and Evaluation.			
7. Record Series Description This file contains the following documents (include form numbers and titles, if any): Attach samples of the file. Documents relating to: maintaining copies of reports prepared under contract or developed by individual scholars or students as private (but sanctioned) reviews of DOR programs or operations. Included are: • Briefing summaries, statistical reports, and narrative reports. File is arranged: numerically by project number; thereunder by date of report.			
8. Monthly Reference Rate One to six months old <u>1</u> ; Seven to twelve months old <u>0</u> ; Thirteen to twenty-four months old <u>0</u> ; twenty-five months and older <u>0</u> ?			
9. Annual Rate of Accumulation of Records Letter-size drawers <u>18</u> ; Legal-size drawers _____; Shelves _____; Other (specify) _____			

YES	NO	10. Questionnaire (Place an "X" in the proper column)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	a. Is this the official copy of the series? If not, where is it?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	b. Does the series contain confidential information requiring security handling? If yes, cite law or regulation.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	c. Is this a vital record?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	d. Does this series have historical or long term research value?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	e. When one or two documents in the file make it necessary to keep the entire file for a long period, could these documents be scheduled separately?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	f. Is the information contained in this series ever published? If yes, attach copy.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	g. Is the information contained in this series ever analyzed and/or recorded in a summarized report? If yes, attach copy.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	h. Is there a duplication of this series in your office, or in another office or agency? If yes, where?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	i. Is this series (or a major portion of it) regularly microfilmed?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	j. Does the record series result in a computer printout?

11. Retention Requirements

The following requires the series to be kept:

- | | | | |
|--------------------------|--------------|-----------------------------------|-----------------|
| a. State Law | _____ years. | d. Audit period | _____ years. |
| b. Statute of limitation | _____ years. | e. Administrative need | <u>5</u> years. |
| c. Federal law | _____ years. | f. Federal retention instructions | _____ years. |

Attach copy or excerpt of laws or regulations. Explain administrative need.

12. Approved Disposition Instructions

This agency recommends that the file series be cut off at the end of each:

☐ Calendar Year; ☒ Fiscal Year; ☐ Other _____ then,

- ☒ Hold in the current files area _____ month(s) 2 year(s); then
- ☐ Transfer to local holding area; hold _____ year(s); then
- ☐ Transfer to State Records Center; hold _____ year(s); then
- ☐ Destroy.
- ☒ Transfer to State Archives for permanent retention.
- ☐ Other (Specify)

These instructions apply to all prior and future accumulations of the series.

Agency Head/Designee (Signature)	Date	Records Management Officer (Signature)	Date
<i>[Signature]</i>		<i>[Signature]</i>	7/5/78
State Records Committee (Signature) _____ Date _____			
Recommendations in paragraph 12 are approved. (If disapproved, attach letter of explanation.) <u>78-154</u>	State Auditor/Designee	<i>[Signature]</i>	8-8-78
	Secretary of State/Designee	<i>[Signature]</i>	8-4-78
	Attorney General/Designee	<i>[Signature]</i>	8-9-78